| | UTILITY | | Attorne | y Docket No. | 135486 | | | | | | |
|---|---------------------------------|----------|---|--|----------------|-----------------------------|---|----------|--|--|--|
| PATENT APPLICATION | | First In | ventor | Thomas Louis Toth | | | | | | | |
| Т | RANSMITTAL | • | Title | | | | | GLE | | | |
| (Only for new nonprovisional applications under 37 CFR 1.53(b) | | Expres | s Mail Label N | | 298647565 | | | | | | |
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | | | ADDRESS TO: Mail Stop Patent Application Commissioner for Patents PO Box 1450 | | | | | | | |
| 1. | | | 8. Nucleo (if appi a. | Alexandria, VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identify of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) [pages] 10. 37 CFR 3.73(b) Statement Power of Attorney (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Statement Copies of IDS Citations (IDS)/PTO-1449 13. Preliminary Amendment 14. Return Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Non Publication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other: 28. Alexandria, VA 22313-1450 (Papelicable) (Papel | | | | | | | |
| Customer Number o | or Bar Code Label | | o. or Attach bar code label here) or Correspondence address below | | | | | | | | |
| Name | John S. Beulick | | | 7.00 | | | | · | | | |
| Address | Armstrong Teasdale LL | | | | | | | | | | |
| City | One Metropolitan Squa St. Louis | State | МО | Zin Code (2122 | | | | | | | |
| Country | | | | | Zip Code 63102 | | | <u></u> | | | |
| Name (Print/Type) | | | phone 314.621.5070 stration No. (Attorney/Agent) | | | Fax 314.621.5065 47,564 | | | | | |
| Signature 2000 | | | . S. GHOIT IV | o. p. morney/Age | | Date | 1 | | | | |
| Certificate of Express Mail certify that the documents listed on this form are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" tervice under 37 C.F.R. § 1.10 on the date indicated above in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | | | | | | | | | | | |
| Thomas M. Fisher | | | Septemb | | | | | 12, 2003 | | | |
| (Printed Name of Person Mailing Correspondence) | | | (Sianatura | Signature of Person Mailing Correspondence) Date | | | | | | | |

PTO/SB/17 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| CEE TO ANO | | Complete if Known | | | | | | | | | |
|---|-----------------------------|---|-----------------------------|--------------|--------|-----------|--|-----------------------------|----------------------------|----------|--|
| FEE TRANS | L [| Application Number | | | | | | | | | |
| for FY 2 | | Filing Date | | | | | | | | | |
| Effective 01/01/2003. Patent fees are subj | | First Named Inventor Thoma | | | Thomas | s Louis T | oth | | | | |
| | Examiner Name | | | | | | | | | | |
| Applicant claims small entity status. So | | Art Unit | | | | | · · | | | | |
| TOTAL AMOUNT OF PAYMENT | Attorney Docket No. 135486 | | | | | | | | | | |
| METHOD OF PAYMENT (check a | FEE CALCULATION (continued) | | | | | | | | | | |
| Check Credit card Money Order | 3. ADDITIONAL FEES | | | | | | | | | | |
| Deposit Account: | | Large Entity Small Entity | | | | | | | | | |
| Deposit Account 070845 | | Fee Code | Fee Fee Fee Fee Description | | | | | | Fee Paid | | |
| Number | | 1051 | 130 | 2051 | 65 | Surch | arge - late | filing fee o | r oath | | |
| Deposit Account GE Medical Systems | | 1052 | 50 | 2052 | | Surch | | provisiona | I filing fee or | | |
| Name The Director is authorized to: (check all that ap) | nlv) | 1053 | 130 | 1053 | | | -English specification | | | | |
| | any overpayments | 1812 | 2,520 | 1812 2 | 2,520 | For fili | iling a request for ex parte reexamination | | | | |
| Charge any additional fee(s) during the pende | ncy of this application | 1804 | 920* | 1804 | 920* | | esting publiner action | lication of S | SIR prior to | | |
| Charge fee(s) indicated below, except for the | filing fee | 1805 | 1,840* | 1805 | 1,840* | Requ | esting pub | | | | |
| to the above-identified deposit account. | | 1251 | 110 | 2251 | 55 | | iner action | n eply within f | irst month | | |
| FEE CALCULATION 1. BASIC FILING FEE | | 1252 | 410 | 2252 | | | | . , | second month | | |
| Large Entity Small Entity | | 1253 | 930 | 2253 | 465 | Exten | sion for re | eply within t | hird month | | |
| Fee Fee Fee Fee Fee Description Code (\$) Code (\$) | Fee Paid | 1254 | 1,450 | 2254 | 725 | Exten | sion for re | eply within f | ourth month | | |
| 1001 750 2001 375 Utility filing fee | 750.00 | 1255 | 1,970 | 2255 | 985 | Exten | sion for re | eply within f | ifth month | | |
| 1002 330 2002 165 Design filing fee | 750.00 | 1401 | 320 | 2401 | 160 | Notice | e of Appea | al | | | |
| 1003 520 2003 260 Plant filing fee | | 1402 | 320 | 2402 | 160 | Filing | a brief in | support of | an appeal | | |
| 1004 750 2004 375 Reissue filing fee | | 1403 | 280 | 2403 | | | est for ora | _ | | | |
| 1005 160 2005 80 Provisional filing f | | 1451 1452 | 1,510 | | | | | | use proceeding | - | |
| SUBTOTAL (1) (\$) 750.00 | | | 110 | 2452 | | | | e - unavoid | | | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | | 1,300 1,300 | 2453 2501 | | | | e - unintent or reissue) | | | |
| Ext <u>ra Claim</u> s | ee from below Fee Paid | 1502 | 470 | 2502 | | | n issue fe | - | , | | |
| Total Claims 37 -20** = 17 | | | 630 | 2503 | 315 | Plant | issue fee | | | | |
| | | | 130 | 1460 | 130 | Petiti | ons to the | | | | |
| | | | 50 | 1807 | 50 | Proce | essing fee | | | | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Fee Descripti | <u>on</u> | 1806 | 180 | 1806 | | | | | Disclosure Stmt | | |
| Code (\$) | of 20 | 8021 | 40 | 8021 | 40 | prope | ung each rty (times | patent ass number of | ignment per properties) | | |
| | ns in excess of 3 | 1809 | 750 | 2809 | 375 | | a submiss FR 1.129(| | nal rejection | | |
| | ent claim, if not paid | 1810 | 750 | 2810 | 375 | • | ` | رم)) onal inventi | on to be | | |
| 1204 84 2204 42 ** Reissue indep | | | | | | exam | ined (37 C | FR 1.129(I | o)) | <u> </u> | |
| over original patent 1205 18 2205 9 ** Reissue claims in excess of 20 | | 1801 | • | | | | | | , , | | |
| 1205 18 2205 9 ** Reissue claim and over origin | 1002 | 1802 900 1802 900 Request for expedited examination of a design application | | | | | | | | | |
| SUBTOTAL (2) | | Other fee (specify) | | | | | | | | | |
| SUBTOTAL (2) (\$) 390.00 **or number previously paid, if greater; For Reissues, see above Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) | | | | | | | | | | | |
| SUBMITTED BY (Complete (if applicable)) | | | | | | | | | | | |
| Name (Print/Type) Thomas Marisher, | | le Registration No. (Attorney/Agent) 47,564 | | | | | Telephone 314-621-5070 | | | | |
| Signature Zhann | 0 | - | | | | | | Date | September 12 | 2003 | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card Information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.